



# Community Health Needs Assessment

SANFORD TRACY MEDICAL CENTER  
2022-2024



Dear Community Members,

Sanford Tracy Medical Center is pleased to present the 2021 Community Health Needs Assessment (CHNA) Report. Sanford Health completes a community health needs assessment every three years. It is through this work that we identify unmet health needs in the community, and then collaborate to create plans to best address those needs. This process aligns very well with Sanford's vision to improve the human condition.

From December 2020 to February 2021, members of the community were invited to complete a survey to identify unmet health needs across of range of social determinants of health. These included economic well-being, transportation, children and youth, the aging population, safety, access to services, and mental and behavioral health. Sanford Health partnered with the NDSU Center for Social Research to analyze the data from the primary research. Key secondary data points from County Health Rankings were also reviewed as part of the overall analysis process. Sanford also facilitated discussions with key stakeholders in each community to prioritize the identified needs.

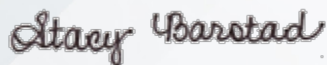
As a result of this process, Sanford Tracy will address the following health needs in a formalized implementation strategy for the 2022-2024 time period:

- Physical Activity and Nutrition
- Mental Health

The CHNA process also focused on the many strengths, support, and resources available to residents of our community. This report includes an overview of the community assets that are offered to address various community health needs. We have also included an impact report detailing progress made with previous implementation strategies from the 2019-2021 CHNA cycle.

Sanford Tracy is grateful to the community members who participated in this assessment process. Your commitment to the health and wellness of our community, and to those who live and work here, is deeply appreciated. Together, we can continue to enhance the quality of life for all area residents in years ahead.

Sincerely,



Stacy Barstad  
Senior Director  
Sanford Tracy Medical Center

## BACKGROUND

### Community Description

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Sanford Tracy Medical Center is located in Tracy, Minnesota. Tracy is in Lyon County, Minnesota and has a population of 2,300. It is situated in a thriving agricultural area with an active retail environment. It is home to Tracy-Milroy-Balaton High School and Elementary School, Tracy Food Pride, a public day care facility, retail shops, and a public library. In addition, the community has numerous churches, city and county parks, senior housing, an aquatic center, and a newly renovated Sanford Tracy Medical Center.

Tracy has much to offer the families who work in the city or commute from nearby communities. Residents and tourists alike can enjoy recreational activities such as hunting, fishing, camping, golfing and biking. Tracy is also home to an annual Labor Day Box Car Day celebration and large Labor Day parade. The primary areas of employment are office and administrative support, healthcare, and production.

The community as defined for purposes of the Community Health Needs Assessment includes Lyon, Redwood, Murray and Cottonwood Counties in Minnesota. Demographic detail for the counties is included in the appendix.

### Partners

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The Community Health Needs Assessment is the result of the hard work and coordination of numerous people within the organization and among community partners. Sanford Health would like to thank and acknowledge the following for their assistance. The development of the program would not have been possible without their expertise regarding the communities and populations we serve.

### Sanford Health

- Michelle Micka, System Vice President, Finance, Health Services
- Dr. Jeremy Cauwels, System Vice President, Chief Physician
- Corey Brown, System Vice President, Government Affairs
- Clarence Mellang, Senior Director, Communications
- Michelle Bruhn, Senior Vice President, Health Services Operations
- Blayne Hagen, Executive Director, Legal
- Stacy Wrightsman, Executive Director, Community Relations
- Matt Ditmanson, Director, Community Benefit Programs
- Emily Griese, Vice President, Population Health and Clinical Operations
- Marnie Walth, Senior Legislative Affairs Specialist
- Joseph Beaudreau, Patient Relations Specialist and Indian Health Advocate
- Phil Clark, Director, Market Research
- Shawn Tronier, Senior Marketing Analyst
- Amber Langner, Vice President, Treasury
- Catherine Bernard, Director, Tax
- Deana Caron, Senior Tax Accountant

## **System Partners**

We would also like to express our gratitude to the following individuals for their expertise during the development and analysis of the Community Health Needs Assessment:

- Jeanne Larson, Executive Director, Northern Dental Access Center
- Carol Biren, Division Director, Southwest Health and Human Services
- Cynthia Borgen, Director, Beltrami County Public Health
- Mary Michaels, Public Health Prevention Coordinator, Sioux Falls Department of Health
- Renae Moch, Director, Burleigh Public Health and President, North Dakota Public Health Association
- Ann Kinney, Senior Research Scientist, Minnesota Department of Health
- Jennifer Nelson, Public Health Educator, Southwest Health and Human Services
- Julie Ward, Vice President of Strategy and Social Innovation, Avera Health
- Jody Lien, Director, Ottertail Public Health
- Karen Pifher, Community Health Program Manager, Essentia Health
- Lori Jensen, Public Health Nurse Beltrami County Health and Human Services
- Erica Solseth, CHI St. Alexius Health
- Sister Nancy Miller, Director Mission Integration, CHI St. Alexius Health
- Nancy Hodur, Director, North Dakota State University Center for Social Research
- Karen Olson, Research Specialist, North Dakota State University Center for Social Research

## **Tracy Partners**

We express our gratitude to the following community collaborative members for their participation in the community stakeholder meetings:

- Denise Clouse - Community Liaison – Sanford Tracy Medical Center
- Stacy Barstad - Senior Director – Sanford Tracy Medical Center
- Gordon Kopperud - Manager Ancillary Services – Sanford Tracy Medical Center
- Carol Biren – Division Director – Southwest Health & Human Services (SWHHS)
- Mistin Allex – Public Health Nurse – Southwest Health & Human Services (SWHHS)
- Brian Hinrichs – Executive Director - Prairie View Senior Living
- Christy Ward – Strategic Planning Advisor – Sanford Health
- Chad Anderson – Superintendent - Tracy Area Public Schools
- Jeri Schons – Director Nursing & Clinical Services – Sanford Tracy Medical Center

## **Sanford Tracy Description**

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Sanford Tracy Medical Center is a 25-bed Critical Access Hospital located in Lyon County in southwest Minnesota. Sanford Tracy has enjoyed a collaborative relationship with Sanford Westbrook Medical Center since 2001. As neighboring communities, these two health care facilities share executive leadership and managerial staffing in the areas of radiology, laboratory, maintenance, and marketing/community relations. The efficiency and cost effectiveness of these shared resources allows each facility to redirect valuable time, energy and financial assets into direct patient care. The two Critical Access Hospitals provide services for approximately 9,400 people.

Built by the City of Tracy in 1960 as a municipal hospital, the hospital became a leased member Sanford Health Network in 1998 and was purchased by Sanford Health in 2016. Sanford Tracy is a designated Level IV Trauma facility. Additional renovation and expansion were completed in 2010 to increase space in the clinic to accommodate additional primary care providers and provide space for visiting medical specialists.

The hospital campus consists of a primary care clinic, medical specialty outpatient clinic, and a 30-apartment senior living facility. In addition, two satellite medical clinics are located in the neighboring communities of Balaton (12 miles to the west) and Walnut Grove (7 miles to the east). The Sanford Tracy service area includes the communities of Tracy, Currie, Balaton, Amiret, Walnut Grove, Milroy and Revere. The population of this area is approximately 5,740. Sanford Tracy employs 4.5 clinicians and 101 employees.

### **CHNA Purpose**

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The purpose of a community health needs assessment is to develop a global view of the population's health and the prevalence of disease and health issues within our community. Findings from the assessment serve as a catalyst to align expertise and develop a Community Investment/Community Benefit plan of action. There is great intrinsic value in a community health needs assessment when it serves to validate and justify the not-for-profit status and create opportunity to identify and address public health issues from a broad perspective. A community health needs assessment identifies the community's strengths, and areas for improvement. A community health needs assessment is critical to a vital Community Investment/Community Benefit Program that builds on community assets, promotes collaboration, improves community health, and promotes innovation and research. A community health needs assessment also serves to validate progress made toward organizational strategies and provides further evidence for retaining our not-for-profit status.

### **Regulatory Requirements**

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Federal regulations stipulate that non-profit medical centers conduct a community health needs assessment at least once every three years and prioritize the needs for the purpose of implementation strategy development and submission in accordance with the Internal Revenue Code 501(r)(3).

The Internal Revenue Code 501(r)(3) requires that each hospital must have: (1) conducted a community health needs assessment in the applicable taxable year; (2) adopted an implementation strategy for meeting the community health needs identified in the assessment; and (3) created transparency by making the information widely available.

The regulations stipulate that each medical center take into account input from persons who represent the broad interests of the community. Hospitals are required to seek at least one state, local, tribal or regional government public health department or state Office of Rural Health with knowledge, information or expertise relevant to the health needs of the community.

Non-profit hospitals are required to seek input from members of medically underserved, low income, and minority populations in the community, or organizations serving or representing the interest of such populations, and underserved populations experiencing disparities or at risk of not receiving adequate care as a result of being uninsured or due to geographic, language or financial or other barriers.

The community health needs assessment includes a process to identify community resources that are available to address the assessed needs and to prioritize the needs.

Hospitals are to address each and every assessed need or explain why they are not addressing the needs. Once the needs have been identified and prioritized, hospitals are required to develop an implementation strategy to address the top needs. The strategies are reported on the IRS 990 and a status report must be provided each year on IRS form 990 Schedule H.

Finally, hospitals are to be transparent with the findings and make the written CHNA report available to anyone who asks for the report. Sanford places the CHNA reports and the implementation strategies on the Sanford website. Hospitals are required to keep three cycles of assessments on the web site. The 2022 report will be Sanford's fourth report cycle since the requirements were enacted in 2010.

Sanford extended a good faith effort to engage all of the aforementioned community representatives in the survey process. We worked closely with public health experts throughout the assessment process. Public comments and responses to the community health needs assessment and the implementation strategies are welcome on the Sanford website or contact can be made at <https://www.sanfordhealth.org/about/community-health-needs-assessment>. No community comments or questions regarding the previous CHNA have been made via the website link or email address.

### CHNA Process

Sanford Health, in coordination with public health experts, community leaders, and other health care providers, within the local community and across Sanford's care delivery footprint, developed a multi-faceted assessment program designed to establish multiple pathways for health needs assessment.



### Limitations

The findings in this study provide an overall snapshot of behaviors, attitudes, and perceptions of residents living in the community. A good faith effort was made to secure input from a broad base of the community. However, gaps in individual data sources may arise when comparing certain demographic characteristics (i.e., age, gender, income, minority status) with the current population estimates. For example, these gaps may occur due to the difficulty in contacting them through the survey process.

To mitigate limitations, the CHNA evaluates community health from several perspectives; a stakeholder and community survey, meetings with community leaders that have special knowledge and expertise regarding populations, secondary data sources such as the U.S. Census Bureau and County Health Rankings, public comments from previous assessments, and institutional knowledge by Sanford employees locally and across the Sanford enterprise.

### Community and Stakeholder Survey

Members of the community were asked a series of questions through an online survey designed in partnership with health experts and public health officials across the Sanford footprint to understand the needs of the community based upon the UW Population Health model. Each respondent was asked to rate community drivers from poor to excellent. Any response other than excellent was offered a follow up opportunity to comment on the reason. Respondents were also asked a series of questions specific to their health care access, health care quality, barriers to care, travel to care, and insurance. The survey was sent to a sample of Lyon, Redwood, Cottonwood, and Murray County, MN populations through Qualtrics, a qualified vendor. The full set of questions is available in the appendix.

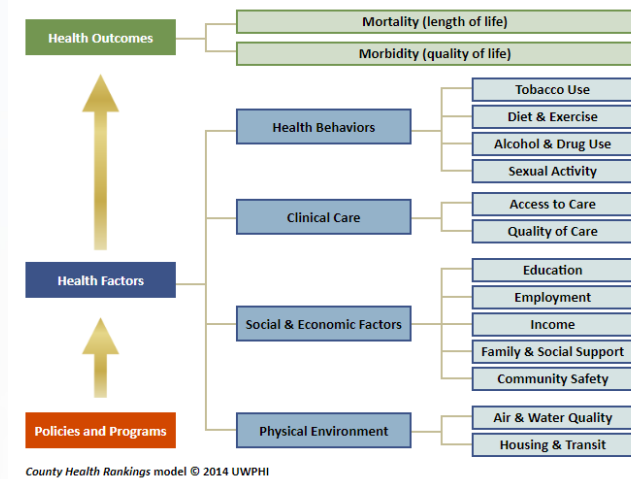
To further promote community involvement the survey was also sent to community stakeholders and elected officials with knowledge and connections amongst medically underserved, low income, or minority populations. Stakeholders were asked to complete the

instrument as a resident of the community and forward the survey to their respective populations for greater involvement. The survey was highlighted in a Sanford Health News article (<https://news.sanfordhealth.org/community/health-needs-assessment-survey/>) and promoted through social media via paid communications. The paid communications yielded 344,300 impressions and 1,150 completed surveys across the system.

Survey data for the local community should be considered directional and best utilized in conjunction with additional data. A total of 254 respondents from the CHNA area completed the survey. 6,748 total respondents from across the Sanford footprint completed the survey.

### Secondary Data

County Health Rankings is based upon the UW Population Health model and serves as the main secondary data source utilized for the community health needs assessment. Alignment of the survey and secondary data within the UW Population Health model allows for greater connection of the data sets. Population data are sourced to the U.S. Census Bureau. Additional data sources may be used and are sourced within the document.



### Health Needs Identification Methodology

The Center for Social Research at North Dakota State University was retained to develop the initial community health needs list for each community and builds upon their involvement during the previous cycle. The following methodology was used to develop the significant health needs presented later in the report:

- Survey data was stratified into representative groups based upon population: large urban communities, medium sized communities, and rural communities. The three groups were analyzed separately. Tracy is included with Bagley, MN; Canby, MN; Canton-Inwood, SD; Chamberlain, SD; Clear Lake, SD; Hillsboro-Mayville, ND; Jackson, MN; Luverne, MN; Sheldon, IA; Webster, SD; Westbrook, MN; and Wheaton, MN.
- To identify community health care needs, each community's score by question was compared to the average stratified composite of the comparative group. For example, if the composite stratified system-wide average score is 4 and an individual community's average response was 2.5, that would suggest an issue of concern and a potential community health care need to be highlighted in the summary findings.
- Upon determination of a potential strength or need, County Health Rankings (<https://www.countyhealthrankings.org/>) and responses from open-ended questions provided additional insights into the drivers of the respective needs.
- A similar methodology was also used to provide additional insights into findings from County Health Rankings data with relevant health needs highlighted in the survey findings.
- Health needs identified through either the survey or County Health Rankings data but not both were also included in the findings.

### Community Asset Mapping

Asset mapping was conducted to find the community resources available to address the assessed needs. Each unmet need was researched to determine what resources were available to address the needs. Once gaps were determined, the prioritization exercise followed with key stakeholder groups determining the top needs.

## **Community Stakeholder Meetings**

Community stakeholders were invited to attend a presentation of the findings of the research. Facilitated discussion commenced and each participant was asked to consider the needs identified above that should be further developed into implementation strategies. Health needs identified during the previous cycle but not raised through the survey or County Health Rankings were also considered. The meeting served to inform the group of the findings but also served as a catalyst to drive collaboration.

The facilitated discussion sought to inform on several aspects:

- What are the biggest challenges currently with these needs in the community?
- Does the community have gaps in services, access, outreach, etc.?
- Opportunities – where can we have greatest impact in addressing these needs?
- Which are most urgent in nature?
- Is there work being done on these identified needs?
- What are the resources currently not utilized within the community that could address this topic?
- Which fall within the purview of healthcare system and which do not? Can the non-healthcare needs be shared with other entities or organizations?
- Is there anything you consider an urgent need that we have not discussed?

Two health needs were identified by consensus during the meeting for inclusion in the implementation plan. The needs were confirmed with participants prior to the meeting's conclusion. Consensus was based upon all factors, including primary and secondary data, input from the community stakeholder meeting, and scalability of current hospital programs and resources to address the identified needs efficiently and effectively. All identified needs not addressed in the implementation plan were shared with other community partners for action. Requests for survey data and other CHNA assets by public health organizations, governmental bodies, and community partners were and continue to be supported.

## **Community Definition**

Lyon, Redwood, Cottonwood, and Murray County, MN are included in the data analysis and represents a majority of volumes to Sanford Tracy Medical Center. The Sanford Tracy service area includes the communities of Tracy, Currie, Balaton, Amiret, Walnut Grove, Milroy and Revere. No population was excluded from the process.



## COMMUNITY HEALTH NEEDS ASSESSMENT FINDINGS

### Community Health Summary

CHNA respondents were asked to rate various community health issues and their personal health and wellness on the following 1 to 5 scale: 1= poor, 2= fair, 3= good, 4= very good, 5= excellent. Overall, perceptions among CHNA respondents in the Tracy area regarding the following community health issues were positive. Average scores as follows:

- Long-term nursing care and senior housing quality (average score=3.18)
- Child care and preschool quality (average score=3.43)
- Health care quality (average score=3.43)
- Access to healthy foods (average score=3.56)
- Access to exercise opportunities (average score=3.59)
- Environmental health (average score=3.69)
- Community safety (average score=3.78)

Of note, average scores for CHNA respondents in the Tracy area for each of these community health issues were lower than the average for similar-sized market areas served by Sanford Health.

When asked about their personal health, CHNA respondents in the Tracy area rated their current health and wellness as good (average score=3.36) and their current ability to access health care services as good (average score=3.59); however, both scores were lower than the comparison group average.

CHR data indicate that Lyon County is among the healthiest counties in Minnesota in terms of overall health. However, CHR data also indicate that Redwood, Murray, and Cottonwood counties are all in the lower, middle range of Minnesota counties in terms of overall health.

The following areas of concern were identified for further discussion (in no particular order).

### Significant Health Needs Identified

#### **Access to Health Care Providers**

Access to affordable, quality health care is important to physical, social, and mental health. Health insurance helps individuals and families access needed primary care, specialists, and emergency care, but does not ensure access on its own—it is also necessary for providers to offer affordable care, be available to treat patients, and be in relatively close proximity to patients.

While CHNA respondents in the Tracy area rated their ability to access health care as good (average score=3.59), the score was lower than the average of similar-sized market areas served by Sanford Health. In addition, when respondents were asked about the most important health care issues impacting their community, access to health care services and providers was their biggest concern (more so than COVID-19 and cost issues).

Among CHNA respondents in the Tracy area, 15 percent indicated they do not currently have a primary care physician, 12 percent said they or a family member needed care in the past year but did not receive it, and 59 percent traveled to receive health care services outside their community in the past three years – all three percentages were similar to the comparison group average. When respondents were asked why they traveled for care, the main reason given was that they needed a specialist or the needed service was not available locally (61%) – which was followed by a physician’s referral (29%) and seeking better or higher quality care (22%).

When asked which health care services they would like to see offered or improved in their community, three in ten CHNA respondents in the Tracy area said walk-in or urgent care (29%) and dental care (29%). One in five respondents said long term care and nursing homes (23%), general surgery (22%), family medicine or primary care (22%), cancer care (20%), and dermatology (19%).

According to CHR, in the Tracy area, there are 1,727 people for every one primary care physician and 2,001 people for every one dentist (ratios which are similar to the comparison group average).

The stakeholder meeting discussion included this topic, particularly as it relates to access to primary care and behavioral health care. The attendees agreed that access as a general concept would not be included in the next 3-year implementation plan, however, the plan does include strategies to increase access to mental health services. Sanford Tracy will continue to promote preventative screens and yearly checks to enhance primary care access.

<b>Local Asset Mapping</b>	
<p><b>Mental Health resources:</b></p> <ul style="list-style-type: none"> <li>• Sanford Tracy, 249 – 5th St. E., Tracy</li> <li>• Prairie View Health Care Center, 250 – 5th St. E., Tracy</li> <li>• Southwest Health &amp; Human Services (serving Lyon Co.), 607 W. Main, Marshall</li> <li>• Helping to Heal (counselor), 192 – 3rd St., Tracy</li> </ul>	<p><b>Health Insurance resources:</b></p> <ul style="list-style-type: none"> <li>• Sanford Health Plan, 300 N. Cherapa Place, Sioux Falls</li> <li>• MNSure – MNSure.org</li> <li>• State Farm, 125 – 4th St., Tracy</li> <li>• Insurance Advisors, 379 Morgan, Tracy</li> </ul>
<p><b>Health Care resources:</b></p> <ul style="list-style-type: none"> <li>• Sanford Tracy Home Health Services, 251 5<sup>th</sup> St. E, Tracy</li> <li>• Sanford Tracy, 249 5th St. E., Tracy</li> <li>• Prairie View Health Care Center, 250 – 5th St. E., Tracy</li> <li>• Tracy Ambulance Service, 105 Center St., Tracy</li> <li>• Public Health Dept., 607 W. Main, Marshall</li> </ul>	

**Access to Affordable Health Care**

Access to affordable, quality health care is important to physical, social, and mental health. Health insurance, local care options, and a usual source of care help to ensure access to health care. Having access to care allows individuals to enter the health care system, find care easily and locally, pay for care, and get their health needs met.

When CHNA respondents in the Tracy area were asked about their biggest health care concerns for themselves and their family (concerns they face on a regular basis), cost and the ability to afford needed health care was their top health care concern (higher than COVID-19 and general access concerns). In addition, when respondents were asked about the most important health care issues impacting their community, the cost of health care was the second biggest concern behind general access issues.

Regarding routine checkups, 25 percent of CHNA respondents in the Tracy area had not been to a physician or provider for a routine checkup in the past year (which was the second highest percentage when compared to similar-sized markets served by Sanford Health). When asked why, the second most common reason stated was cost and the inability to afford care (21%), behind COVID-19 concerns (50%). In addition, 12 percent of CHNA respondents in the Tracy area indicated that they or a family member needed medical care in the past year but did not receive

it (which was similar to the comparison group average). When asked why, the second leading reason stated was cost and the inability to pay for health care services (41%), behind COVID-19 concerns (44%).

Stakeholders at the local meeting briefly discussed this topic, but did not promote its inclusion in the implementation plan. The group felt that other areas of need were more urgent at this time. Sanford Tracy strives to inform eligible patients of financial assistance programs available locally and will continue to do so in the future.

<b>Local Asset Mapping</b>	
<p><b>Employment resources:</b></p> <ul style="list-style-type: none"> <li>• Economic Development Assn., 336 Morgan St.,</li> </ul> <p><b>Tracy Major Employers:</b></p> <ul style="list-style-type: none"> <li>• Tracy School District, 934 Pine St., Tracy</li> <li>• Sanford Tracy, 249 – 5th St. E., Tracy</li> <li>• City of Tracy, 336 Morgan St., Tracy</li> <li>• Tracy Food Pride, 1105 Morgan St, Tracy</li> <li>• North Star Homes, 900 – 4th St. E., Tracy</li> <li>• Minnwest Bank, 250 – 3rd St., Tracy</li> <li>• Premium Plant Services, 900 – 4th St. E., Tracy</li> <li>• Harvest States, 301 South St., Tracy</li> </ul>	<p><b>Health Insurance resources:</b></p> <ul style="list-style-type: none"> <li>• Sanford Health Plan, 300 N. Cherapa Place, Sioux Falls</li> <li>• MNSure – MNSure.org</li> <li>• State Farm, 125 – 4th St., Tracy</li> <li>• Insurance Advisors, 379 Morgan, Tracy</li> </ul>
<p><b>Prescription Assistance programs:</b></p> <ul style="list-style-type: none"> <li>• CancerCare co-payment assistance, 800-813-4673</li> <li>• Freedrugcard.us</li> <li>• Rxfreecqrd.com</li> <li>• Medsavercard.com</li> <li>• Yourrxcard.com</li> <li>• Medicationdiscountcard.com</li> <li>• Needymeds.org/drugcard</li> <li>• Caprxprogram.org</li> <li>• Gooddaysfromcdf.org</li> <li>• NORD Patient Assistance Program, rare diseases.org</li> <li>• Patient Access Network Foundation, panfoundation.org</li> <li>• Pfizer RC Pathways, pfizerRX pathways.com</li> <li>• RXhope.com</li> <li>• Prescriptionassistance.info</li> <li>• Minnesota Care – 1-800-657- 3761</li> <li>• MN Drug Card – mndrugcard.com</li> </ul>	<p><b>Prescription Assistance Programs Cont.</b></p> <ul style="list-style-type: none"> <li>• Minnesota Care – 1-800-657- 3761</li> <li>• MN Drug Card – mndrugcard.com</li> <li>• Partnership for Prescription Assistance – pparx.org/intro.php</li> <li>• Benefitscheckup.org</li> <li>• RxAssist – rxassist.org</li> <li>• RxOutreach – rxoutreach.com</li> <li>• Together RX Access Program – togetherrxaccess.com</li> <li>• Glaxo Smith Kline – bridgestoaccess.gsk.com</li> <li>• Merck – merck.com/merkhelps</li> <li>• Novartis – patientassistncenow.com</li> <li>• Pfizer – pfizerhlepfulanswers.com</li> <li>• AARP Prescription Discount Program – aarppharmacy.com</li> <li>• PlanPlus – planplushealthcare.com</li> <li>• FamilyWize – familywise.org</li> </ul>

**Physical Activity and Nutrition**

The environments where people live, learn, work, and play affect access to healthy food and opportunities for physical activity which, along with genetic factors and personal choices, shape the health and the risk of being overweight and obese.

When CHNA respondents in the Tracy area were asked about their biggest health care concerns for themselves and their family (concerns they face on a regular basis), chronic health issues were the third biggest concern. The most commonly cited chronic health concerns by CHNA respondents in the Tracy area involved excess weight, obesity, and diabetes. CHR data indicate that one in ten adults in the Tracy area has diabetes (11%) and one in three adults has obesity (36%), both of which are similar to the average for similar-sized market areas served by Sanford

Health. CHR data also indicate that 69 percent of residents in the Tracy area have access to exercise opportunities and 9 percent are low-income and do not live close to a grocery store – and both of these percentages are similar to the comparison group average.

Local stakeholders discussed the link between physical activity and nutrition and overall health. In particular, attendees indicated improved activity and nutrition could help to improve mental health of area residents. The group suggested this topic as an important component of the next 3-year implementation plan for Sanford Tracy.

<b>Local Asset Mapping</b>	
<p><b>Chronic Disease resources:</b></p> <ul style="list-style-type: none"> <li>• Sanford Tracy, 249 – 5th St. E., Tracy</li> <li>• Sanford Medical Home, 249 – 5th St. E., Tracy</li> <li>• Sanford Tracy Home Health Services, 251 5<sup>th</sup> St. E, Tracy</li> <li>• Sanford’s Better Choices Better Health, 249 – 5th St. E., Tracy</li> <li>• Public Health Dept., 607 W. Main, Marshall</li> <li>• American Heart Assn. – heart.org</li> </ul>	<p><b>Obesity resources:</b></p> <ul style="list-style-type: none"> <li>• Sanford Tracy, 249 – 5th St. E., Tracy</li> <li>• Sanford dieticians, 249 – 5th St. E., Tracy</li> <li>• Public Health Dept., 607 W. Main, Marshall</li> </ul>
<p><b>Healthy Eating resources:</b></p> <p>Grocery Stores:</p> <ul style="list-style-type: none"> <li>o Tracy Food Pride, 1105 Morgan St., Tracy</li> <li>o Asia Grocery, 106 – 3rd St., Tracy</li> </ul> <p>Tracy Farmers Market, 1045 Craig Ave., Tracy</p> <p>CSAs within 1 hr. of Tracy:</p> <ul style="list-style-type: none"> <li>o Schreier Farm, 2135 – 191st St., Tracy</li> <li>o Gardner Bees, 28260 – 130th St., Sleepy Eye</li> <li>o Kleine’s Country Farm, 26471 – 370th Ave., Westbrook</li> <li>o Omega Maiden Oils, 37574 co. Rd. 11, Lamberton</li> <li>o Holmberg Orchard, 12697 – 325th St., Vesta</li> <li>o Jubilee Fruits &amp; Vegetables, 1310 Mtn. Lk. Rd., Mountain Lake</li> <li>o Krienke Foods, 35584 Co. Rd. 8, Mountain Lake</li> <li>o Ron’s Veggies, 86750 – 150th St., Sacred Heart</li> <li>o Sonja’s Farm Fresh, 8157 – 160th St., Sacred Heart</li> </ul>	<p><b>Physical Activity resources:</b></p> <ul style="list-style-type: none"> <li>• Fitness Depot, 600 E. Union St., Tracy</li> <li>• Sanford Fit Kids – sanfordfit.org</li> <li>• Parks &amp; Recreation Dept., 336 Morgan St., Tracy</li> <li>• School District activities, 934 Pine St., Tracy</li> <li>• Golf, 10752 US 14, Tracy</li> <li>• Tracy Aquatic Center, 283 Elm, Tracy</li> <li>• Tracy Bowling Lanes, 242 Morgan, Tracy</li> <li>• Softball Complex, E. Craig Ave., Tracy</li> <li>• Mountain Bike Trail, 2683 - 234th Ave., Marshall</li> <li>• Hiking &amp; Biking Trails</li> <li>• Parks &amp; Playgrounds: <ul style="list-style-type: none"> <li>o Greenwood Park, Greenwd. Ave. &amp; Adams St., Tracy</li> <li>o Legion Park, Craig &amp; 10th Streets, Tracy</li> <li>o Tornado Memorial Park, Hwy 14 &amp; 5th St., Tracy</li> <li>o Central Park, 2nd &amp; Rowland Sts., Tracy</li> <li>o Roadside Park, Hwy 14 &amp; Center St., Tracy</li> <li>o Swift Lake Park, 1342 Co. Rd. 11, Tracy</li> <li>o Nehl’s Park, Hwy 14, Tracy</li> <li>o Softball Complex, behind 900 – 4th St. E., Tracy</li> <li>o Werner Park, E. Hollett &amp; 1st St., Tracy</li> <li>o Sebastian Park, 2nd St. E. &amp; Elm St., Tracy</li> </ul> </li> </ul>

## **Mental Health**

Mental health includes our emotional, psychological, and social well-being and affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, and make choices. Mental health is important at every stage of life, from childhood and adolescence through adulthood<sup>1</sup>.

When CHNA respondents in the Tracy area were asked which health care services they would like to see offered or improved in their community, most said behavioral and mental health services (44%) followed by addiction treatment (31%). According to CHR, adults in the Tracy market average about 3.7 mentally unhealthy days each month and 13 percent of adults average at least 14 days of mental distress per month – both rates are similar to the comparison group average.

According to CHR, in the Tracy area there are 834 people for every one mental health provider (which is similar to the comparison group average). The local stakeholders in attendance at the Sanford Tracy CHNA stakeholder meeting were in agreement that mental health care is a pervasive and ongoing need in the area. As such, it will be prioritized as part of the new implementation plan.

<b>Local Asset Mapping</b>	
<b>Mental Health resources:</b> <ul style="list-style-type: none"><li>• Sanford Tracy, 249 – 5th St. E., Tracy</li><li>• Sanford Tracy Home Health Services, 251 5<sup>th</sup> St. E, Tracy</li><li>• Southwest Health &amp; Human Services, 607 W. Main, Marshall</li><li>• Avera Behavioral Health, 300 S. Bruce St., Marshall</li><li>• Western Mental Health Center, 1212 E. College Dr., Marshall</li></ul>	<b>Tobacco Cessation resources:</b> <ul style="list-style-type: none"><li>• Sanford Tracy, 249 – 5th St. E., Tracy</li><li>• Public Health Dept., 607 W. Main, Tracy</li><li>• QuitPlan, MN Dept. of Health – 651-201-5000</li><li>• Southwest Health &amp; Human Services, 607 W. Main, Marshall</li></ul>
<b>Substance Abuse resources:</b> <ul style="list-style-type: none"><li>• Project Turnabout, 1220 Birch St., Marshall</li></ul>	<b>Dementia/Alzheimer’s resources:</b> <ul style="list-style-type: none"><li>• Sanford Tracy, 249 – 5th St. E., Tracy</li><li>• Sanford Tracy Home Health Services, 251 5<sup>th</sup> St. E, Tracy</li><li>• Prairie View Health Care Center, 250 – 5th St. E., Tracy</li></ul>

## **Employment and Economic Opportunities**

Economic factors, such as income and employment can significantly affect how well and how long we live. These factors affect our ability to make healthy choices, afford medical care and housing, and manage stress.

CHNA survey results indicate that respondents in the Tracy area rated the employment and economic opportunities in their community as less than good (average score=2.92). When asked to explain why they rated these opportunities as they did, responses focused on there being fewer businesses and job opportunities in smaller communities, forcing many to drive long distances to find work.

CHR data indicated that 4 percent of adults in the Tracy area are unemployed (which is slightly higher than the comparison group average). CHR data also indicate that the median household income in the Tracy area (\$59,670), which is similar to the comparison group average. The child

<sup>1</sup> U.S. Department of Health & Human Services, MentalHealth.gov. Available at <https://www.mentalhealth.gov/basics/what-is-mental-health>

poverty rate (13%) is slightly lower than the comparison group average, but 43 percent of children are eligible for free- or reduced-price lunches, which is higher than the comparison group average.

While employment and economic opportunities were discussed at the stakeholder meeting, particularly as it relates to workforce, the topic is not included in the Implementation Plan. The stakeholder group indicated that other organizations, including those listed in the asset map, were working to address this need locally. Sanford Tracy will partner with local entities as relevant opportunities arise.

Local Asset Mapping	
<b>Employment resources:</b> <ul style="list-style-type: none"> <li>• Economic Development Assn., 336 Morgan St., Tracy</li> </ul>	<b>Major Employers:</b> <ul style="list-style-type: none"> <li>• Tracy School District, 934 Pine St., Tracy</li> <li>• Sanford Tracy, 249 – 5th St. E., Tracy</li> <li>• City of Tracy, 336 Morgan St., Tracy</li> <li>• Tracy Food Pride, 1105 Morgan St, Tracy</li> <li>• Premium Plant Services, 900 – 4th St. E., Tracy</li> <li>• CHS, Inc., 301 South St., Tracy</li> </ul>

### **Public Transportation**

Transportation systems help ensure that people can reach everyday destinations, such as jobs, schools, healthy food outlets, and health care facilities, safely and reliably. Public transportation services play an important role for people who are unable to drive, people without access to personal vehicles, children, individuals with disabilities, and older adults<sup>2</sup>.

CHNA respondents in the Tracy area rated community access to daily transportation as less than good (average score=2.89). When asked to explain why they rated community access to daily transportation the way they did, CHNA responses highlighted limited to no public transportation options available, especially in rural areas. Where options exist, responses indicated that routes and hours are limited, making access to health care appointments difficult.

The stakeholder group discussed local issues with transportation, particularly for area seniors. The group indicated that MAT had added some local bus routes, but they are having difficulty hiring enough drivers to provide adequate coverage. The group determined that public transportation was not an area that should be prioritized in the implementation plan at this time.

Local Asset Mapping	
<b>Transportation Resources Tracy:</b> <ul style="list-style-type: none"> <li>• Department of Transportation, 336 Morgan St, Tracy</li> <li>• Tracy Ambulance Service Inc. 105 Center St, Tracy, (507) 629-3297</li> <li>• City of Tracy Municipal Building, 336 Morgan St, Tracy</li> </ul>	<b>Transportation Resources Marshall:</b> <ul style="list-style-type: none"> <li>• Community Transit Bus, 720 Kossuth Ave, Marshall (507) 537-7628</li> <li>• Department of Transportation, 1800 E College Dr, Marshall</li> <li>• Southwest Minnesota Taxi, 109 W 5<sup>th</sup> St S Ste 350, Marshall (507) 401-0694</li> <li>• Down Town DD, 301 W College Dr, Marshall, (507) 828-5443</li> <li>• Southwest Coaches Inc., 1500 Travis Rd, Marshall</li> <li>• Southwest Transportation Inc., 230 W Lyon St #104, Marshall</li> <li>• Jefferson Lines, 1100 E Main St, Marshall</li> </ul>

<sup>2</sup> Centers for Disease Control and Prevention, Office of the Associate Director for Policy and Strategy, Population Health and Healthcare Office. Available at <https://www.cdc.gov/policy/hst/hi5/publictransportation/index.html>.

## **Affordable Housing**

There is a strong and growing evidence base linking stable and affordable housing to health. As housing costs have outpaced local incomes, households not only struggle to acquire and maintain adequate shelter, but also face difficult trade-offs in meeting other basic needs. When the majority of a paycheck goes toward the rent or mortgage, it can be difficult to afford doctor visits, healthy foods, utility bills, and reliable transportation to work or school. This can, in turn, lead to increased stress levels and emotional strain.

CHNA respondents in the Tracy area rated the availability of affordable housing in their community as less than good (average score=2.83) and lower than any other community health issue. When asked to explain why they rated community access to affordable housing the way they did, respondents cited an overall lack of affordable units to meet the need based on incomes in the community.

In the stakeholder meeting, the group discussed the overall housing situation (affordable and other) in the area. There was consensus that opportunities are extremely limited. However, this topic was not chosen for inclusion in the implementation plan as the group felt there were other areas that were better suited for a health system to address and other areas that were likely more impactful for the community over time.

<b>Local Asset Mapping</b>	
<b>Housing Resources:</b> <ul style="list-style-type: none"><li>• Housing &amp; Redevelopment: 760</li></ul>	<b>Low Income Housing:<sup>3</sup></b> <ul style="list-style-type: none"><li>• Tracy Area Housing, 465 Harvey St, Tracy</li><li>• Twin Circle Apartments, 760 Morgan St, Tracy</li></ul>

## **Sanford Area of Focus**

The significant health needs noted above were brought forward as topics of discussion at the local meeting, which brought together a range of community leaders with knowledge of medically underserved, low income, or minority populations. Members of the local public health agency and Sanford Health were also present. List of attendees is included in the introduction of this report.

Stakeholders discussed the health needs, causes, and provided additional insight for their local populations and community resources. Participants were also encouraged to offer additional needs that may not have been raised during the research process; none were brought forward.

<sup>3</sup> <https://affordablehousingonline.com/housing-search/Minnesota/Tracy>

## IMPLEMENTATION PLAN

### **Priority 1: Physical Activity and Nutrition**

Sanford Health is positioned locally to have a positive impact on Physical Activity and Nutrition within the community. This effort will focus on two primary goals:

1. RN Health Coach Program and Diabetic Education Program
2. Provide alternative options for those community members who are hungry and/or lacking food options.

### **Current activities**

Sanford Tracy currently has an RN Health Coach available to work with patients to establish health lifestyle habits. Sanford Tracy also offers FIT Club classes at our local elementary school which teaches students about eating right, exercising, getting enough rest, and emotional well-being.

### **Projected Impact**

Upon completion of the action plan, the Community would see a positive impact on physical wellbeing specifically related to obesity and chronic illness like high blood pressure and diabetes, as well as a positive impact on the lack of nutritional food access.

### **Goal 1: RN Health Coach Program and Diabetic Education Program**

Actions/Tactics	Measurable Outcomes & Timeline	Resources to be committed	Leadership	Note community partnerships and collaborations (if applicable)
Continue RN Health Coach program	Improvement of numbers like A1C in diabetics, BMI in diabetics, those with high blood pressure and those with obesity and blood pressure reduction for those with high blood pressures.	RN Health Coach time to run program. Referrals from providers.	Alex LeTendre, RN; Patty Kolar, RN; Josh Sammons; Stacy Barstad	
Diabetic Education Program	Begin diabetic education program running through the clinic in Fall of 2021.	Diabetic Education RN time to run program. Referrals from providers. Promotion of community	Kassandra Quade, RN; Patty Kolar, RN; Josh Sammons; Stacy Barstad; Denise Clouse	



	Increase awareness of program to community throughout 2022 with promotion. Host 1-2 community education events in 2022 and 2023.	education events.		
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**Goal 2: Provide an alternative option for those community members who are hungry and/or lacking food options.**

<b>Actions/Tactics</b>	<b>Measurable Outcomes &amp; Timeline</b>	<b>Resources to be committed</b>	<b>Leadership</b>	<b>Note community partnerships and collaborations (if applicable)</b>
Collaborate with local food shelf to create a “pantry” location at clinic.	Have food available by end of 2021. Total number of families utilizing services	Location and storage space. Distribution.	Josh Sammons; Patty Kolar, RN; Stacy Barstad; Denise Clouse; Angela Deadrick, LICSW	Tracy Food Shelf

**Priority 2: Mental Health**

Sanford Health is positioned locally to have a positive impact on Mental Health within the community. This effort will focus on two primary goals:

1. Increase screening for depression and referrals to behavioral health specialists.
2. Raise awareness of mental health and behavioral health providers and services at Sanford Tracy.

**Current activities**

Sanford Tracy currently has behavioral health services available in the clinic. We also offer psychiatry telemedicine services.

**Projected Impact**

Upon completion of the action plan, the Community would see a lowered number of mental health days from community members and a positive increase in awareness of mental health services in the community.

**Goal 1: Increase screening for depression and referrals to behavioral health specialists.**

<b>Actions/Tactics</b>	<b>Measurable Outcomes &amp; Timeline</b>	<b>Resources to be committed</b>	<b>Leadership</b>	<b>Note community partnerships and collaborations (if applicable)</b>
Behavioral Health Screening	Achieve 100% screening of all patients 12+ once a year (for patients without prior history of depression/anxiety) with the behavioral health screening tool. Decrease number of mental health days in the community.	Clinic nurse and provider time to complete and review screenings. Additional time needed if screenings trigger need for additional screening (PHQ9 or GAD7) for depression or anxiety.	Patty Kolar,RN; Josh Sammons; Dr. Varunpal Reddy Sama; Alex LeTendre, RN	
Referrals	Availability of services communicated to outside providers and facilities.	Clinic/Community Relations	Denise Clouse; Behavioral Health Team; Josh Sammons	Southwest Health and Human Services/Southwest Mental Health Center

**Goal 2: Awareness of mental health and behavioral health providers and services at Sanford Tracy.**

<b>Actions/Tactics</b>	<b>Measurable Outcomes &amp; Timeline</b>	<b>Resources to be committed</b>	<b>Leadership</b>	<b>Note community partnerships and collaborations (if applicable)</b>
Create awareness of mental health and behavioral health providers and services available at Sanford Tracy.	Availability of Services communicated to public at least twice a year. Increase utilization of mental health services. Increase awareness of services.	Community Relations	Denise Clouse	Southwest Health and Human Services/Southwest Mental Health Center

### **Needs Not Addressed**

Following are needs identified during the CHNA process—as referenced in the Community Health Needs Assessment Report above—that are not addressed as a significant need for the purpose of this process, and as such, are not included in the formal implementation plan.

**Access to Health Care Providers:** Access to health care providers is not included in the Implementation Plan as it was determined to be a lower priority compared to others for purposes of the Community Health Needs Assessment. Sanford Tracy will continue working with Sanford Health on obtaining additional outreach providers to enhance access to specialty care for Tracy area residents. Sanford also promotes the use of telehealth and virtual care services across a number of specialties to increase local options for care.

**Access to Affordable Health Care:** Access to affordable health care is not included in the Implementation Plan as it was determined to be a lower priority compared to others for purposes of the Community Health Needs Assessment. Sanford Tracy continually strives to inform eligible patients of financial assistance programs available locally through governmental and private sources. Sanford Tracy also works to be more transparent and to provide a more consistent pricing model at its facilities.

**Employment and Economic Opportunities:** Employment and economic opportunities are not included in the Implementation Plan as the stakeholder group indicated that other organizations, including those listed in the asset map, are addressing the need, Sanford Tracy will share the findings of this survey with community partners including local EDA and Health and Human Services organizations. Sanford Tracy will partner with local entities as needed if relevant and impactful opportunities to do so arise.

**Public Transportation:** Public transportation is not included in the Implementation Plan as the stakeholder group indicated that other organization, including those listed in the asset map, are addressing the need. Sanford Tracy provides care navigators and social workers to help patients obtain needed services in the community. Sanford Tracy is also addressing the need by sharing the findings of this survey with community partners including local City, EDA and Health and Human Services organizations.

**Affordable Housing:** Affordable housing is not included in the Implementation Plan as the stakeholder group indicated that other organization, including those listed in the asset map, are addressing the need. Sanford Tracy will share the findings of this survey with community partners including local City, EDA and Health and Human Services organizations.

## EVALUATION OF 2019-2021 CHNA

### Priority 1: Wellness

Goal: Improved physical health and wellness

Strategy:

- Utilize dietitian services for patients with chronic disease.
- Provide medical supplies for patients in need.
- Expand Sanford fit program.

Sanford Tracy Medical Center seeks to improve physical and chronic health and overall wellness of Tracy community members through dietitian and RN health coach services, providing needed medical supplies to low income patients, and expanding Sanford fit programming.

Dietician services – Dietician and RN Health Coach services continued to be offered and referred to in 2020. Our Dietician had 10 visits in 2020 (11 in 2019). Our RN Health Coach had 227 visits in 2020, which was an increase from 2019 (182 visits).

Medical supply availability – The medical supplies that were purchased in 2018/2019 for low-income/in-need patients were all distributed in 2019. Discussions were progressing on how to find funding to continue this initiative/project, but were halted in early 2020 due to COVID19. The intention is to begin brainstorming once again on how to revive this project.

Sanford fit programming – 2020 saw staff continue with the Sanford fit program, which focuses on health lifestyle choices to decrease childhood obesity, with the Tracy Area Elementary 4th grade class. Unfortunately, the 2020 session was cut short due to COVID19 and the schools going to distance learning. Resources for at home learning and exercise were as provided to the teachers. The 4th graders took a pre-test, but were unable to take the post-test, so we were unable to measure their learning from the program.

### Priority 2: Health Care Access

Goal: Community members understand their access options for mental health and behavioral health services

Strategy:

- Create awareness of mental health telemedicine services and local behavioral health services.
- Explore specialty outreach.

Our staff is committed to improving access to health care through education and awareness. Specifically, additional awareness of mental health services is needed along with additional outreach services and medical supplies for low-income and in-need patients.

Mental health awareness – continued awareness campaigns for telemedicine services and local behavioral health services began in 2020, but were quickly halted in March due to COVID19. Yet, provider referrals were a major factor in the continued use of our in-house behavioral health services. Behavioral Health providers in Tracy saw 77 new referrals in 2020 and a grand total of 1016 visits for the year. The slight decline in visits may be attributed to COVID19 and the hesitancy for patients to seek care.

Specialty outreach - Orthopedic and dermatology outreach were both to begin in early 2020, but due to unforeseen circumstances not related to COVID19, the services did not come to fruition. We continue to look at options for both orthopedic and dermatology outreach services, however, COVID19 slowed that process down in 2020.

Medical supply availability – The medical supplies that were purchased in 2018/2019 for low-income/in-need patients were all distributed in 2019. Discussions were progressing on how to find funding to continue this initiative/project, but were halted in early 2020 due to COVID19. The intention is to begin brainstorming once again on how to revive this project.

## CONTACT INFORMATION

The Community Health Needs Assessment, Implementation Plan, and survey data are available online at <https://www.sanfordhealth.org/about/community-health-needs-assessment>. The website includes current and historical reports.

Anyone wishing to receive a free printed copy, obtain information on any topic brought forth in the report, or offer public comments for consideration during the implementation plan or future Community Health Needs Assessment work, please contact us at [Community.Benefits.Sanford@SanfordHealth.org](mailto:Community.Benefits.Sanford@SanfordHealth.org) or visit <https://www.sanfordhealth.org/contact-us>.

## APPENDIX

### Survey Responses

Survey responses are available through an online dashboard at <https://www.sanfordhealth.org/about/community-health-needs-assessment>

### Expanded Demographics<sup>4</sup>

These counties make up a small proportion of the Minnesota population with Lyon County being the largest at 25,000 in 2019. Additionally, all counties observed have experienced a negative population trend 2010-2019 of between -1.5% and -6.1%, while the state grew by 6.3%. The counties all have a lower population density than the state does with Lyon County being the closest at 36.2 people per square mile with Minnesota's total of 66.6 people per square mile.

The median housing value of in all four counties is lower than the state median of \$223,900, with the lowest being Cottonwood at under \$95,000. High school graduation rates between the county and state as a whole are similar. Labor force participation rates are slightly lower in the counties than the state. County residents on average make less than the state median. Total employment decreased in all counties, aside from Murray County, which grew 2.1%, while it has remained stagnant in the state of Minnesota as a whole.

	Murray County, MN	Redwood County, MN	Cottonwood County, MN	Lyon County, MN	Minnesota
Population estimates, July 1, 2019, (V2019)	8,194	15,170	11,196	25,474	5,639,632
Population estimates base, April 1, 2010, (V2019)	8,725	16,058	11,687	25,858	5,303,927
Population, percent change - April 1, 2010 (estimates base) to July 1, 2019, (V2019)	-6.1%	-5.5%	-4.2%	-1.5%	6.3%
Population per square mile, 2010	12.6	18.3	18.3	36.2	66.6
Persons under 5 years, percent	5.5%	6.4%	6.6%	7.2%	6.2%
Persons under 18 years, percent	21.4%	24.9%	24.6%	25.7%	23.1%
Persons 65 years and over, percent	26.0%	21.6%	23.1%	16.5%	16.3%
White alone, percent	95.8%	88.9%	91.3%	89.6%	83.8%
Black or African American alone, percent	0.5%	1.1%	1.3%	3.4%	7.0%
American Indian and Alaska Native alone, percent	0.5%	5.0%	0.9%	0.8%	1.4%
Asian alone, percent	1.6%	2.6%	4.1%	4.7%	5.2%
Native Hawaiian and Other Pacific Islander alone, percent	0.2%	0.1%	0.4%	0.1%	0.1%
Two or More Races, percent	1.3%	2.3%	2.0%	1.5%	2.6%
Hispanic or Latino, percent	4.4%	3.8%	8.4%	7.2%	5.6%
White alone, not Hispanic or Latino, percent	92.2%	86.4%	84.7%	83.3%	79.1%
Median value of owner-occupied housing units, 2015-2019	\$120,100	\$106,300	\$94,200	\$148,900	\$223,900
Median gross rent, 2015-2019	\$572	\$641	\$629	\$666	\$977

<sup>4</sup> U.S. Census Bureau QuickFacts

Households with a computer, percent, 2015-2019	85.1%	85.0%	85.8%	91.5%	91.6%
Households with a broadband Internet subscription, percent, 2015-2019	74.7%	72.0%	75.9%	83.6%	84.8%
High school graduate or higher, percent of persons age 25 years+, 2015-2019	90.2%	90.9%	89.4%	92.0%	93.1%
Bachelor's degree or higher, percent of persons age 25 years+, 2015-2019	20.7%	19.1%	20.0%	26.1%	36.1%
With a disability, under age 65 years, percent, 2015-2019	8.0%	5.6%	8.8%	6.1%	7.3%
Persons without health insurance, under age 65 years, percent	7.0%	8.3%	7.3%	6.6%	5.8%
In civilian labor force, total, percent of population age 16 years+, 2015-2019	64.6%	63.9%	62.2%	69.7%	69.6%
Median household income (in 2019 dollars), 2015-2019	\$60,231	\$55,404	\$52,087	\$57,730	\$71,306
Per capita income in past 12 months (in 2019 dollars), 2015-2019	\$31,874	\$28,611	\$27,459	\$29,634	\$37,625
Persons in poverty, percent	8.5%	9.7%	10.8%	10.6%	9.0%
Total employer establishments, 2019	283	540	342	808	151,495
Total employment, 2019	2,622	5,730	3,784	12,617	2,729,420
Total employment, percent change, 2018-2019	2.1%	-1.2%	-1.0%	-2.2%	0.0%

## CHNA Survey Questionnaire

The survey tool was delivered online via Qualtrics. The survey questions are presented below as a reference.

Thank you for your interest in the Community Health Needs Assessment. Your confidential responses are vital to helping understand the factors driving the health needs of the community.

### RESIDENCE

Please enter your county of residence: \_\_\_\_\_

Please enter your zip code: \_\_\_\_\_

What is your current age? \_\_\_\_\_

### COMMUNITY

How would you rate the quality of HEALTH CARE available in your community?

Poor      Fair      Good      Very Good      Excellent      Don't Know  
                             

In your opinion, what is the most important HEALTH CARE issue your community faces?

How would you rate the quality of LONG-TERM CARE, NURSING HOMES & SENIOR HOUSING services in your community?

Poor      Fair      Good      Very Good      Excellent      Don't Know  
                             

Why did you give it that rating?

How would you rate the quality of CHILDCARE, DAYCARE & PRE-SCHOOL services in your community?

Poor      Fair      Good      Very Good      Excellent      Don't Know  
                             

Why did you give it that rating?

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1



**How would you rate the availability of AFFORDABLE HOUSING in your community?**

Poor      Fair      Good      Very Good      Excellent      Don't Know  
                             

**Why did you give it that rating?**

**How would you rate the ability of residents to ACCESS DAILY TRANSPORTATION in your community?**

Poor      Fair      Good      Very Good      Excellent      Don't Know  
                             

**Why did you give it that rating?**

**How would you rate your community's EMPLOYMENT & ECONOMIC OPPORTUNITIES?**

Poor      Fair      Good      Very Good      Excellent      Don't Know  
                             

**Why did you give it that rating?**

**How would you rate your community as being a SAFE place to live?**

Poor      Fair      Good      Very Good      Excellent      Don't Know  
                             

**Why did you give it that rating?**

**How would you rate the ENVIRONMENTAL health of your community?**

*(clean air, clean water, etc.)*

- Poor  Fair  Good  Very Good  Excellent  Don't Know

**Why did you give it that rating?**

**How would you rate the ability of residents to access HEALTHY & NUTRITIONAL FOODS in your community?**

- Poor  Fair  Good  Very Good  Excellent  Don't Know

**Why did you give it that rating?**

**How would you rate the ability of residents to access PHYSICAL ACTIVITY & EXERCISE OPPORTUNITIES in your community?**

- Poor  Fair  Good  Very Good  Excellent  Don't Know

**Why did you give it that rating?**

**YOUR HEALTH AND WELLNESS**

**Overall, how would you rate YOUR current state of health & wellness?**

- Poor  Fair  Good  Very Good  Excellent  Don't Know

What is the biggest HEALTH CARE concern you or your family face on a regular basis?

Are there any health care services that you would like to see OFFERED or IMPROVED In your community?

- Yes Please answer next question
- No Skip to 'Your Health Care Usage' section

Please select the health care services you would like to see OFFERED or IMPROVED In your community. (Select all that apply)

- |   |   |
|---|---|
| <input type="radio"/> Addiction Treatment                     | <input type="radio"/> Heart Care                      |
| <input type="radio"/> Behavioral Health / Mental Health       | <input type="radio"/> Labor and Delivery              |
| <input type="radio"/> Cancer Care                             | <input type="radio"/> Long-Term Care / Nursing Homes  |
| <input type="radio"/> Chiropractic Care                       | <input type="radio"/> Orthopedics and Sports Medicine |
| <input type="radio"/> Dental Care                             | <input type="radio"/> OBGYN / Womens' Care            |
| <input type="radio"/> Dermatology                             | <input type="radio"/> Pediatrics / Childrens' Care    |
| <input type="radio"/> Emergency / Trama                       | <input type="radio"/> Walk-in / Urgent Care           |
| <input type="radio"/> Eye Services (Ophthalmology, Optometry) | <input type="radio"/> Other (please specify):         |
| <input type="radio"/> Family Medicine / Primary Care          |   |
| <input type="radio"/> General Surgery                         |   |

**YOUR HEALTH CARE USAGE**

Do you currently have a primary care physician or provider who you go to for general health issues?

- Yes
- No

How long has it been since you last visited a physician / provider for a routine check up or screening?

- |   |   |
|---|---|
| <input type="radio"/> Within the past year    | <input type="radio"/> More than 5 years ago |
| <input type="radio"/> Within the past 2 years | <input type="radio"/> Never                 |
| <input type="radio"/> Within the past 5 years |   |

**What has kept you from having a routine check-up?** *(Select all that apply)*

- |   |   |
|---|---|
| <input type="checkbox"/> Cost/Inability to Pay              | <input type="checkbox"/> No child care                            |
| <input type="checkbox"/> COVID-19                           | <input type="checkbox"/> Wait time for appointments are too long  |
| <input type="checkbox"/> Don't feel welcomed or valued      | <input type="checkbox"/> Clinic hours are not convenient          |
| <input type="checkbox"/> Don't have insurance               | <input type="checkbox"/> Fear / I do not like going to the doctor |
| <input type="checkbox"/> My insurance is not accepted       | <input type="checkbox"/> Nothing / I do not need to see a doctor  |
| <input type="checkbox"/> Lack of transportation             | <input type="checkbox"/> Don't have a primary care physician      |
| <input type="checkbox"/> Distance / lack of local providers | <input type="checkbox"/> Other <i>(please specify)</i> :          |
| <input type="checkbox"/> Getting time off from work         |   |

**How would you rate your current ability to ACCESS health care services?**

- |                       |                       |                       |                       |                       |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Poor                  | Fair                  | Good                  | Very Good             | Excellent             |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Why did you give it that rating?

**In the past year, did you or someone in your family need medical care, but did not receive the care needed?**

- Yes    No    Unsure

**What are the reasons you or a family member did not receive the care needed?**

- |   |   |
|---|---|
| <input type="checkbox"/> Cost/Inability to Pay              | <input type="checkbox"/> No child care                            |
| <input type="checkbox"/> COVID-19                           | <input type="checkbox"/> Wait time for appointments are too long  |
| <input type="checkbox"/> Don't feel welcomed or valued      | <input type="checkbox"/> Clinic hours are not convenient          |
| <input type="checkbox"/> Don't have insurance               | <input type="checkbox"/> Fear / I do not like going to the doctor |
| <input type="checkbox"/> My insurance is not accepted       | <input type="checkbox"/> Nothing / I do not need to see a doctor  |
| <input type="checkbox"/> Lack of transportation             | <input type="checkbox"/> Don't have a primary care physician      |
| <input type="checkbox"/> Distance / lack of local providers | <input type="checkbox"/> Other <i>(please specify)</i> :          |
| <input type="checkbox"/> Getting time off from work         |   |

## TRAVELING FOR CARE

Have you or a member of your family TRAVELED to receive health care services outside of your community within the past 3 years?

- Yes     No

If yes, Where did you travel to? (If you traveled more than once, enter the most recent place you traveled to?)

City \_\_\_\_\_ State \_\_\_\_\_

What was the main reason you traveled for care? (select all that apply)

- |   |  |
|---|--|
| <input type="radio"/> Referred by a physician                                 | <input type="radio"/> Immediate / faster appointment                   |
| <input type="radio"/> Better / higher quality of care                         | <input type="radio"/> On vacation / traveling / snowbirds              |
| <input type="radio"/> Medical emergency                                       | <input type="radio"/> Cost or insurance coverage                       |
| <input type="radio"/> Needed a specialist / service was not available locally | <input type="radio"/> Don't feel welcomed or valued by local providers |
| <input type="radio"/> Second opinion  |  |

Other (please specify)

## YOUR HEALTH INSURANCE

Do you currently have health insurance?

- Yes     No

Please indicate the source of your health insurance coverage.

- Employer (Your employer, spouse, parent, or someone else's employer)
- Individual (Coverage bought by you or your family)
- Federal Marketplace (Minnesota Care / Obamacare / Affordable Care Act)
- Medicare
- Medicaid
- Military (Tricare, Champus, VA)
- Indian Health Service (IHS)

Other (please specify)

## DEMOGRAPHICS

What is your biological sex?

- Male    Female

Do you, personally, identify as lesbian, gay, bisexual, transgender or queer?

- Yes    No

How many people live in your house, including yourself? \_\_\_\_\_

How many children under age 18 currently live with you in your household? \_\_\_\_\_

Are you Spanish, Hispanic, or Latino in origin or descent?

- Yes    No

What is your race? *(Select all that apply)*

- American Indian or Alaska Native  
 Caucasian or White  
 Asian  
 Native Hawaiian or Pacific Islander  
 Black or African American  
 Other *(please specify)*

How long have you been a US citizen?

- I am not a US citizen  
• Are you planning to become a US citizen?    Yes    No    Prefer not to answer  
 0 - 5 years  
 6 - 10 years  
 More than 10 years

What language is spoken most frequently in your home? \_\_\_\_\_

What is your current marital status?

- Married    Divorced  
 Single, never married    Widowed  
 Unmarried couple living together    Separated

**Which of the following best describes your current living situation?**

- House (*owned*)
- Apartment or House (*rental*)
- Homeless
- Some other arrangement

**What is your primary mode of daily transportation?**

- Automobile/Truck (*owned or leased*)
- Online Ride Service (*Uber / Lyft*)
- Taxi Service
- Public Transportation (*bus / subway / rail*)
- Other (*please specify*)
- Walk
- Bicycle
- Family, Friends or Neighbors
- I do not have a primary mode of daily transportation

**What is the highest level of school you have completed or the highest degree you have received?**

- Less than high school degree
- High school graduate (*high school diploma or equivalent including GED*)
- Some college but no degree
- Associate degree in college (*2-year*)
- Bachelor's degree in college (*4-year*)
- Master's degree
- Doctoral degree
- Professional degree (*JD, MD*)

**Your current employment status is best described as:**

- Employed (*full-time*)
- Employed (*part-time*)
- Self-employed
- Furloughed
- Not employed, looking for work
- Not employed, not looking for work
- Retired
- Disabled or unable to work

**What is your total household income from all sources?**

- Less than \$20,000
- \$20,000 - \$24,999
- \$25,000 - \$29,999
- \$30,000 - \$34,999
- \$35,000 - \$49,999
- \$50,000 - \$74,999
- \$75,000 - \$99,999
- \$100,000 - \$199,999
- \$200,000 or more

Thank you for completing the survey. Your responses ensure more accurate and targeted solutions to address identified health issues.